Quarterly Totals

Demographic Reporting Form

Positive Alternatives

Date:	April 14, 2015	Grantee Name: <u>Face to Face</u>

1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	2	19	16	0	0	0	0

2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post- partum	Pregnancy Status Unknown
21	13	3	0	0

3. Client Marital Status:

Married	Not Married	Marital Status Unknown
4	32	1

4. Client Race:

Race: White	Race: African- American	Race: African- African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
5	16	1	0	8	6	1

5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown	
9	27	1	

INSTRUCTIONS FOR COMPLETING DEMOGRAPHIC REPORTING FORM

- 1. Enter the date covered by the reporting period. The date will correspond to the quarterly report (e.g., January March, 2014).
- 2. Enter your organization name.
- **3.** Using the Individual Demographic forms collected during the reporting period, enter the totals for each of the demographic categories in numbers 1-5.
- **4.** Save the form as a new document. Send it in by email with your Update Report of the same quarter. Reports are due the 20th of the month after the end of a quarter.
- **5.** Reuse the form each quarter.